

FROMMER LAWRENCE & HAUG LLP

745 Fifth Avenue
New York, New York 10151
Telephone: (212) 588-0800
Facsimile: (212) 588-0500
E-mail: Firm@flhlaw.com

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FACSIMILE COVER LETTER

To: Commissioner for Patents
Examiner Boris M. Pesin

Firm: U.S. Patent and Trademark Office
Art Unit 2174

Facsimile: (571) 273-8300

From: Thomas F. Presson

Date: November 18, 2005

Re: FLH Ref No.: 450100-03166
Serial No: 09/838,484

Number of Pages: 15
(including cover page)

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0032592

PATENT
450100-03166

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : Eduardo Augusto Sciammarella, et al.
 Serial No. : 09/838,484
 Filed : April 19, 2001
 For : SYSTEM FOR MANAGING DATA OBJECTS
 Examiner : Boris M. Pesin
 Art Unit : 2174

745 Fifth Avenue
 New York, NY 10151
 Tel: 212-588-0800

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☒ No additional fee is required.
☐ The fee has been calculated as shown below.
☐ This is an application of a small entity under 37 CFR 1.9(f), and the amounts shown in parentheses apply.

Claims as Amended

(1)	(2) Claims remaining after amendment	(3)	(4) Highest number previously paid for	(5) Present extra	(6) Rate	(7) Additional Fee
Total claims	34	Minus	** = 40	* 0 x	\$50 (25)	= \$ 0
Independent claims	2	Minus	*** = 4	* 0 x	\$200 (100)	= \$0.00
Total additional fee for this amendment						\$ 0 00

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

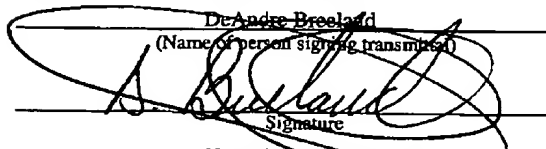
** If the highest number of total claims previously paid for is less than 20, write "20" in this space.

*** If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

- ☐ This application contains a multiple dependent claim. The required fee of \$300 (150) has been previously paid ☐, or is paid herewith ☐.
- ☐ This response is being filed within the ___ month following the expiration of the term originally set therefor. This is a petition to request a ___ month extension of time. A check covering the cost of the petition is enclosed.
- ☐ A check in the amount of \$_____ is attached, which covers the cost of ☐ additional claims _ petition for extension of time.
- ☐ Charge \$_____ to Deposit Account No. 50-0320.
- ☒ Please charge any additional fees incurred by reason of this response or credit any overpayment to Deposit Account No. 50-0320.

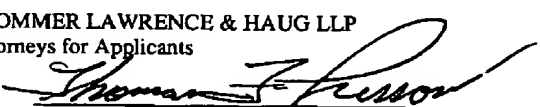
CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being transmitted via facsimile to (571) 273-8300 on November 18, 2005.

Dr. Andre Breeland
 (Name of person signing transmitted)

 Signature
 November 18, 2005
 Date of Signature

Respectfully submitted,

FROMMER LAWRENCE & HAUG LLP
 Attorneys for Applicants

By: 
 Thomas F. Presson
 Reg. No. 41,442

U.S. Appln. No. 09/838,484
Reply to Office Action dated November 3, 2005

PATENT
450100-03166

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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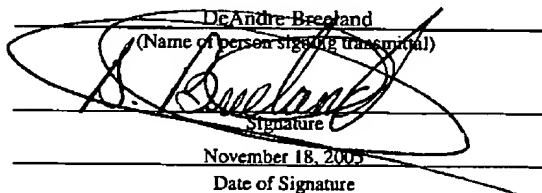
NOV 18 2005

Applicants : Eduardo Augusto Sciammarella, et. al.
Serial No. : 09/838,484
Filed : April 19, 2001
For : SYSTEM FOR MANAGING DATA OBJECTS
Examiner : Boris M. Pesin
Art Unit : 2174
Confirmation No. : 8959

745 Fifth Avenue
New York, NY 10151

CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being transmitted via
facsimile to (571) 273-8300 on November 18, 2005.

DC Andre Breeland
(Name of person signing transmittal)

Signature
November 18, 2005
Date of Signature

AMENDMENT UNDER 37 C.F.R. §1.116

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Final Office Action mailed on November 3, 2005, having a
three-month statutory period for response set to expire on February 3, 2006, please amend the
above-identified application as follows.

U.S. Appln. No. 09/838,484
Reply to Office Action dated November 3, 2005

PATENT
450100-03166

Amendments to the Claims are reflected in the listing of claims which begins on page 3 of this paper.

Remarks/Arguments begin on page 13 of this paper.